2011-24 A

AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

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Cincin	nati <u>Bel</u> l Any Dist	ance Inc.							
	any Name					FEIN/SSN			
Broady	wing Telecommu	nications Ir	ıc., eGix, (FKA)			(513)397	<u>7-6385</u>		
Dba/fk	a					Telephone a	#		
	ast Fourth Stree g Address	<u>t</u>							
	nati, Ohio 45201 tate, Zip Code								
<u>Cincina</u> Busine	nati ss Location								
Cincin	nati Ohio 45201					Hamilton			
	tate, Zip Code			•	.,.	County			
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			REGISTERE	DAG	ENLINE	JRMATION			
Registe	ered Agent: <u>Corp</u>	<u>oration Ser</u>	vice Company						
Mailing	Address: <u>1703 L</u>	_aurel Stree	<u>et</u>						
City, S	tate, Zip Code: _	Columbia	ı, SC 29201						
Ē	oursuant to the Co	ommission'	s rules and regula	ations,	print or t	ype company co	ntact for the follow	ving areas:	
A.			n Ave, Norwood, Ohic dress if different than						
	(513)397-1424 /	•	1			lave.heimbach@ci	nbell.com		
	Telephone Numbe	r	Facsimile Num	nber		E-mail Address			
B.			e, Norwood, Ohio 452 nts Representative		le address	if different than abo			
	(513)397-9801		•	•		@cinbell.com	,		
	Telephone Numbe	r	Facsimile Num			E-mail Address			
C1.	Kathy Campbell, 221 East Fourth Street, 103-1280, Cincinnati, Ohio 45201 Customer Relations/Complaints Representative for Escalated Complaints (Include address if different than above.)								
	(513)397-1296		•			obell@cinbell.com		,	
	Telephone Numbe	r	Facsimile Num			E-mail Address	****		
C2.	1 (877) 290-2777 Customer Contac	t (Toll Free I	Number)				TB ac	and senten	
D.			et, Cincinnati, Ohio 45 ude address if differer		above.)		MAR 2	1 2001	
	(513)606-6657				ackett@cin	pell.com	CLEANS	OF Mense	
	Telephone Number	7	Facsimile Numb			E-mail Address			
E.	Mike Waggoner, 12	2650 Hamilto	n Crossing Blvd, Carr	mel Ind	iana, 4603	2			
			ess if different than a						
	(513)397-8557	<u> </u>			mike.wagg	oner@evolve.cinbel	l.com_		
	Telephone Number	•	Facsimile Numb	er		E-mail Address			

F.	Kermit Lovelace Emergencies (During non-office hours)										
	(513)397-7326 /	1	Kermit.lovelace@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address	-							
<u>In addi</u>	tion, please provide the f	ollowing company contact infor	mation to assist in proper rou	uting of correspo	endence and invoices:						
G.	Ted Heckmann, 221 East Fourth Street, 103-1280, Cincinnati, Ohio 45201 Regulatory Officer (Include address if different than above.)										
	(513)397-1375 /		ted.heckmann@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address								
H.	Julie Richardson Dual Party Mailings (Name)										
	221 East Fourth Street, 103-1170, Cincinnati, Ohio 45201										
	Mailing Address (513)397-7722 /	ı	Julie.richardson@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address								
1.	Julie Richardson Interim LEC Fund Maili	ngs (Name)			_						
		03-1170, Cincinnati, Ohio 45201									
	Mailing Address	03-1170, Ontchinati, Onio 43201	· · · · · · · · · · · · · · · · · · ·								
	(513)397-7722 /		Julie.richardson@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address								
J.	Julie Richardson Universal Service Fund	Mailings (Name)									
	221 East Fourth Street, 1	03-1170, Cincinnati, Ohio 45201									
	Mailing Address										
	(513)397-7722 / Telephone Number	Facsimile Number	Julie.richardson@cinbell.com E-mail Address								
IZ.	·	racsimile Multipel	E-mail Address								
K.	Julie Richardson Gross Receipts Mailings (Name)										
	221 East Fourth Street, 103-1170, Cincinnati, Ohio 45201										
	Mailing Address	05-1170, Cincilitati, Offio 45201			_						
	<u>(513)397-7722</u> /		Julie.richardson@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address								
L.	Julie Richardson										
	Lifeline Mailings (Nam	e)									
		03-1170, Cincinnati, Ohio 45201			_						
	Mailing Address (513)397-7722 /	1	Julie.richardson@cinbell.com								
	Telephone Number	Facsimile Number	E-mail Address								
	Kathy Campbell										
	This form was completed	by (print name)		Signature	·						
	Regulatory Specialist		February 1, 2011		-						
	ו	Title		Date							
	RETURN COMPLETED F	FORM TO:									
		e Commission of SC	Office of Regulatory St								
	Clerk's Office		Attn: Jeanne Gordon								
	Post Office D		1401 Main Street, Suite								
	Columbia, So	outh Carolina 29211	Columbia, South Carol	ina 29201	(Rev. PSC 11/2010)						